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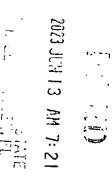
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COVER LETTER

TO: Registration Se Division of Cor					
KURLAU'I	TOMATION LLC				
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and feets) are sub-	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	CARLOS J BARBOSA				
	Name of Person				
	MATRIX INTERNATION	VAL BUSINESS CONSULTING	ILC		
		Firm ² Company			
	759 SW FEDERAL HIGH	WAY SUITE 304			
		Address			
	STUART, FLORIDA, 349	4).4			
		City/State and Zip Code			
	INFO@ MATRIX-USA.US				
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report no all:	outication)		
CARLOS J BARBOSA	oncerning and matter, prease c	561 9029038			
	of Person		ime Telephone Number		
isanie o	ar i cison	Area Code Dayi.	mie Telephone Sammer		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	© \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
<u>Mailing Addres</u> Registration		Street Address: Registration S	Section		
Division of Corporations		Division of Corporations			
P.O. Box 632 Tallahassee,		The Centre of 2415 N. Mon	Taffahassee roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KURI AUTOMATION LLC		2023 JUN 13 AH 7: 21
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our reco limited Liability Company)	1415.1
The Articles of Organization for this Limited Liability Co Florida document number $\frac{1.23000265011}{1.23000265011}$	mpany were filed on $\frac{05/31/2023}{}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limit</u>	ed liability company here:	
the new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRI	ESS)	
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	office address on our records, <u>ente</u>	er the name of the new regist
gent and/or the new registered office address here;		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addi	'ess
	•	Zlouido
 -	Cin:	Florida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title .	<u>Name</u>	Address	Type of Action
MGR	HERNANDEZ ROJA, ANGEL	759 SW FEDERAL HIGHWAY SUITE 304	□Add
		STUART, FLORIDA, 34994	■Remove
MGR	HERNANDEZ ROJAS, ANGEL	759 SW FEDERAL HIGHWAY SUITE 304	= Add
		STUART, FLORIDA, 34994	□Remove
			□Change
AMBR	HERNANDEZ ROJA, JAIME	759 SW FEDERAL HIGHWAY SUITE 304	
		STUART, FLORIDA, 34994	Remove
			[] Change
AMBR	HERNANDEZ ROJAS, JAIME	759 SW FEDERAL HIGHWAY SUITE 304	= Add
		STUART, FLORIDA, 34994	□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

				
				
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Charles day if all and a shared	e date of filing:	rior to date of filing or mor	(optional) e than 90 days after filing)) Pursuant to 605,0207 (
an effective date is listed, the date m	alook down not more the ope	olicable statutory filing	requirements, this date	will not be listed as t
an effective date is listed, the date m <u>fote:</u> If the date inserted in this l ocument's effective date on the				
<u>lote:</u> If the date inserted in this l	Department of State's recor	rds,	i the earlier of: (b) Th	ne 90th day after the
<u>fote:</u> If the date inserted in this locument's effective date on the record specifies a delayed effect	Department of State's recor	rds,	n the earlier of: (b) Th	ne 90th day after the
Tote: If the date inserted in this locument's effective date on the record specifies a delayed effect I is filed.	Department of State's recor	rds.	3A	ne 90th day after the